

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO:

101 593,458

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT			AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1						51						
2		1					52						
3		12					53						
4		1					54						
5		1					55						
6		7					56						
7		10					57						
8		1					58						
9		10					59						
10		1					60						
11	1						61						
12		1					62						
13		1					63						
14		21					64						
15		10					65						
16		1					66						
17		10					67						
18		1					68						
19		10					69						
20		1					70						
21		10					71						
22		1					72						
23		10					73						
24		1					74						
25		10					75						
26		1					76						
27		10					77						
28		1					78						
29		10					79						
30		1					80						
31	1						81						
32	1						82						
33		1					83						
34		2					84						
35		1					85						
36		10					86						
37		1					87						
38		10					88						
39	1						89						
40		1					90						
41		1					91						
42		1					92						
43	1						93						
44		1					94						
45		1					95						
46		1					96						
47		1					97						
48		1					98						
49							99						
50							100						
TOTAL IND.	(6	↓			↓	↓	TOTAL IND.		↓			↓	
TOTAL DEP.	42	←			←	←	TOTAL DEP.		←			←	
TOTAL CLAIMS	48						TOTAL CLAIMS						